### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

S	chedule E)		PAGE 1 OF 9 FOR SE OF FORM 24/48					
NAME OF COMMITTEE (In Full)								
C	OREGON RIGHT TO LIFE VICTORY PAC  C C00592303							
Ch	neck if X 24-hour report 48-hour report New report Amends	s report filed	on 05 10 2016					
	Full Name of Payee Eagle Web Press		Date of Public Distribution/Dissemination					
	Mailing Address 4901 Indian School Rd NE		04 20 2016 Amount					
	City State Zip Code		3.14					
	Salem OR 97305		Transaction ID : WFT20164101844-1 Date of Disbursement or Obligation					
	Purpose of Expenditure voter guide printing  Category/ Type		05 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	Name of Federal Candidate	oort Office	e Sought: House District:					
	Cruz, Ted, , ,		President Senate State:					
	Calendar Year-To-Date Per Election for Office Sought	Disbu 2016	Other (specify) ▶					
	Full Name of Payee	Date of Public Distribution/Dissemination						
	Gateway Communications, Inc							
	Mailing Address 16805 NE Mason Court		Amount					
	City State Zip Code		581.66					
	Portland OR 97230		Transaction ID : WFT20164101851-1 Date of Disbursement or Obligation					
	Purpose of Expenditure design, printing and mailing of postcard Category/ Type		05 / 10 / Y Y Y Y Y					
	Name of Federal Candidate Supp	oort Offic	e Sought: House District:					
	Cruz, Ted, , ,	ose x	President Senate State:					
	Calendar Year-To-Date Per Election for Office Sought 23873.76	Disb 2016	ursement For:   Primary General  Other (specify)					
		·						
	(a) SUBTOTAL of Itemized Independent Expenditures	······	584.80					
	(b) SUBTOTAL of Unitemized Independent Expenditures	······						
	(c) TOTAL Independent Expenditures	······· <b>&gt;</b>						
	Under penalty of perjury I certify that the independent expenditures reported herein with, or at the request or suggestion of, any candidate or authorized committee or ac party committee) any political party committee or its agent.							
	Atteberry, Gayle, , ,   [Electronically Filed]  Signature		19 / 2016					

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

PAGE 2 OF 9 FOR SE OF FORM 24/48									
NAME OF COMMITTEE (In Full)  ODE CON DICHT TO LIFE VICTORY DAC									
OREGON RIGHT TO LIFE VICTORY PAC  C C00592303									
Check if X 24-hour report 48-hour report New report X Amends report filed on 05 / 10 / 2016									
Full Name of Payee Eagle Mailing Service				of Public Distribution/Dissemination					
Mailing Address 4907 Indian School Road NE			Amou	04 20 2016 unt					
	Otata	7'- 0-1-							
City Salem	State OR	Zip Code 97305		1.31 saction ID : WFT20164101842-1 of Disbursement or Obligation					
Purpose of Expenditure mailing of voter guide		Category/ Type		05 / 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Name of Federal Candidate		<b>✗</b> Support	Office Sough	nt: House District:					
Cruz, Ted, , ,		Oppose	<b>x</b> Presid						
Calendar Year-To-Date Per Election for Office Sought	, , ,	7.96	Disbursemer 2016	nt For: <b>x</b> Primary General Other (specify) ▶					
Full Name of Payee Kilada, David, , ,  x DAvid Kilada was reim Mailing Address 29560 SW Volley #50		Date of Public Distribution/Dissemination  05  02  2016							
		7: 0 !	Allo						
City Wilsonville	State OR	Zip Code 97070		5.00 action ID: WFT20164101849-1 of Disbursement or Obligation					
Purpose of Expenditure social media		Category/ Type		05 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Name of Federal Candidate		<b>✗</b> Support	Office Soug	ht: House District:					
Cruz, Ted, , ,		Oppose	<b>X</b> Presid	lent Senate State:					
Calendar Year-To-Date Per Election for Office Sought	7	23292.10	Disbursement 2016	nt For: <b>x</b> Primary General Other (specify) ▶					
(a) SUBTOTAL of Itemized Independent Expenditures									
(b) SUBTOTAL of Unitemized Independent Expenditures									
(c) TOTAL Independent Expenditures			•	141141141					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.									
Atteberry, Gayle, , , Signature	[Electron	ically Filed] Date	10	19 / 2016					

FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ OREGON RIGHT TO LIFE VICTORY PAC C00592303 Check if | X | 24-hour report New report | X | Amends report filed on 48-hour report 05 2016 10 Full Name of Payee Date of Public Distribution/Dissemination Gateway Communications, Inc. 04 2016 28 Mailing Address 16805 NE Mason Court Amount State Zip Code City 23276.00 Transaction ID : WFT20164101846-1 OR 97230 Portland Date of Disbursement or Obligation Purpose of Expenditure Category/ design, printing and mailing of postcard 04 29 2016 Type Name of Federal Candidate Office Sought: × Support House District: Cruz, Ted,,, Oppose President Senate State: X Disbursement For: Primary General Calendar Year-To-Date 2016 23287.10 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Postmaster 20 2016 Mailing Address 1050 25th St Se Amount City State Zip Code 2.32 OR Transaction ID: WFT20164101835-1 Salem 97301 Date of Disbursement or Obligation Purpose of Expenditure Category/ mailing of voter guide 2016 04 28 Type Name of Federal Candidate **✗** Support Office Sought: House District: Cruz, Ted, , , OR Oppose **X** President Senate State: **x** Primary Disbursement For: Calendar Year-To-Date General 2016 6.65 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 23278.32 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Atteberry, Gayle, , , [Electronically Filed] 10 19 2016 Date Signature

**PAGE** 

Per Election for Office Sought  Full Name of Payee Hill, Casey, , ,  Mailing Address 1642 SW 58th Ave  City State Zip Code Portland OR 97221  Portland OR 97221  Purpose of Expenditure design for voter guide  Name of Federal Candidate Cruz, Ted. ,		include Ly						FOR SE O	F FORM	24/48
Check if							FEC I	DENTIFICAT	ON NUI	MBER ▼
Full Name of Payee Alpha Media, LLC  Mailing Address 1211 Sw 5th Ave Suite 600  City State Zip Code Purpose of Expenditure radio ads Swite 1642 SW 58th Ave Suite 600  Name of Federal Candidate X Support Office Sought: X House District: 05 President Senate State: CR  City Shate Zip Code Office Sought: X House District: 05 President Senate State: OR  Calendar Year-To-Date Per Election for Office Sought: X Shate Size OR  Portland OR 97221  Full Name of Payee Hill, Casey, ,	_			С	C00592303					
Alpha Media, LLC  Mailing Address 1211 Sw 5th Ave Suite 600  City State Zip Code Portland OR 97204  Purpose of Expenditure radio ads  Name of Federal Candidate  Willis, Colm., Oppose President Senate State OR  Calendar Year-To-Date Per Election for Office Sought  Name of Payee  Hill, Casey, ,  Mailing Address 1642 SW 58th Ave  City State Zip Code  Purpose of Expenditure (Category) Tiype Office Sought Transaction ID: WFT20164101914-1  Date of Disbursement or Obligation  Date of Public Distribution/Dissemination  OA 20 2016  Amount  Transaction ID: WFT20164101914-1  Date of Disbursement For: X Primary Genera  Purpose of Expenditure  design for voter guide  Name of Federal Candidate  X Support Office Sought: House Distribution/Dissemination  OA 20 2016  Amount  Transaction ID: WFT20164101827-1  Date of Disbursement or Obligation  OA 20 2016  Amount  City State Zip Code  Amount  City State Zip Code  Amount  City State Zip Code  OA 20 2016  Amount  City State Zip Code  OA 20 2016  Amount  City State Zip Code  OA 20 2016  OA 20 2016  OA 33 2016  OA 38	Che	eck if 24-hour report 48-hour report New report	: An	nends repo	rt filed					
Mailing Address 1211 Sw 5th Ave Suite 600  City State Zip Code Portland OR 97204  Purpose of Expenditure redic add State State Oppose President Senate State OR Oppose Portland OR 97221  Full Name of Payee Hill, Casey, State Zip Code Other (specify) ▶  Category' Disbursement For Image of Payee Hill, Casey, State Description of Other (specify) ▶  Category' Disbursement For Image of Payee Other Oppose Oth	1					Date o	of Publ	ic Distribution	/Dissem	ination
Mailing Address 1211 Sw 5th Ave Suite 600  City State Zip Code Portland OR 97204  Purpose of Expenditure radio ads  Name of Federal Candidate  Willis, Colm, Oppose  Calendar Year-To-Date Per Election for Office Sought  Full Name of Payce Hill, Casey, , ,  Mailing Address 1642 SW 58th Ave  City State Zip Code Portland OR 97221  Purpose of Expenditure City State Zip Code Hill, Casey, , ,  Mailing Address 1642 SW 58th Ave  City State Zip Code Gesign for voter guide  Name of Federal Candidate  Cruz, Ted., Oppose  Calendar Year-To-Date Per Election for Office Sought  Category' Type  Category' Type  Category' Type  Calendar Year-To-Date Per Election for Office Sought  Cought State Cought State Cought Support Cought Suppor		Alpha Media, LLC								
Portland  Purpose of Expenditure radio ads  Name of Federal Candidate  Willis, Colm, ,		Mailing Address 1211 Sw 5th Ave Suite 600	_			Amour	nt			
Portland  Purpose of Expenditure radio ads  Name of Federal Candidate  Willis, Colm, ,	-	City State Zip Co	ode						1000	00.00
Purpose of Expenditure radio ads  Name of Federal Candidate  Willis, Colm  Calendar Year-To-Date Portland  Portland  OR  OR  OR  OR  OR  OR  OR  OR  OR  O		Portland OR 97204							6410191	4-1
Willis, Colm, .		radio ade				M	- M	/ D D /	YY	YY
Calendar Year-To-Date Per Election for Office Sought  Full Name of Payee Hill, Casey, ,  Mailing Address 1642 SW 58th Ave  City State Zip Code Portland OR 97221  Category/ design for voter guide  Name of Federal Candidate Cruz, Ted, , Oppose Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures  Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee) any political party committee or its agent.  Attaberry, Gayle, ,   [Electronically Filed]  Disbursement For: ★ Primary Genera  Office Sought: House District:  Attaberry, Gayle, ,   [Electronically Filed]  Date 10 19 2016	-	Name of Federal Candidate	×	Support	Office	Sought	t:	<b>X</b> House	District:	05
Per Election for Office Sought  Full Name of Payee Hill, Casey, , ,  Mailing Address 1642 SW 58th Ave  City State Zip Code Portland OR 97221  Portland OR 97221  Transaction ID: WF720164101827-1  Transaction ID:		Willis, Colm, , ,		Oppose		Preside	ent [	Senate	State:	OR
Full Name of Payee Hill, Casey, , ,  Mailing Address 1642 SW 58th Ave  City State Zip Code Portland OR 97221  Purpose of Expenditure design for voter guide  Name of Federal Candidate Cruz, Ted, , Oppose  Category/ Type  Category/ Type  Category/ Type  Office Sought: House District: Cruz, Ted, , Oppose  Category/ Type  Category/ Type  Category/ Type  Office Sought: House District: Disbursement For: X Primary Genera 2016  Other (specify) >  Cother (specify) >  Cot			93.02						у 🗌	General
Hill, Casey, , ,  Mailing Address 1642 SW 58th Ave  City State Zip Code Portland OR 97221  Purpose of Expenditure design for voter guide  Name of Federal Candidate  Cruz, Ted, , Oppose X President Senate State:  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures.  (b) SUBTOTAL of Unitemized Independent Expenditures.  Cruz, Ted, , Fresident Senate State:  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Unitemized Independent Expenditures.  (b) SUBTOTAL of Unitemized Independent Expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Atteberry, Gayle, , IElectronically Filed)  Date 10 19 2016		Total Elocated Tell College Cought	52							
Mailing Address 1642 SW 58th Ave  City State Zip Code Portland OR 97221  Purpose of Expenditure design for voter guide  Name of Federal Candidate Cruz, Ted, ,						M	- M	/ D D	Y	■ Y ■ Y
Portland  OR  97221  Transaction ID: WFT20164101827-1 Date of Disbursement or Obligation  Purpose of Expenditure design for voter guide  Name of Federal Candidate  Cruz, Ted, ,		Mailing Address 1642 SW 58th Ave						20		010
Purpose of Expenditure design for voter guide    Category/ Type	1	City State Zip Co	ode							4.33
design for voter guide  Name of Federal Candidate  Cruz, Ted, , ,			1							
Cruz, Ted, , ,		design for voter guide				М				
Cruz, Ted, , ,		Name of Federal Candidate	x	Support	Office	Sough	t:	House	District:	
Calendar Year-To-Date Per Election for Office Sought  4.33  Disbursement For:  Primary General 2016 Other (specify)   (a) SUBTOTAL of Itemized Independent Expenditures		Cruz, Ted, , ,		Oppose	×	Preside	ent [	Senate	State:	
(a) SUBTOTAL of Itemized Independent Expenditures			4.33	3	Disbu	irsemen	t For:	<b>X</b> Primar	у	General
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  **Atteberry, Gayle, , ,	(	(a) SUBTOTAL of Itemized Independent Expenditures			. •			7	1000	4.33
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  **Atteberry, Gayle, , ,  [Electronically Filed] Date 10 19 2016	(	(b) SUBTOTAL of Unitemized Independent Expenditures								
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Atteberry, Gayle, , ,  [Electronically Filed] Date Date 10 19 2016	(	(c) TOTAL Independent Expenditures			· <b>•</b>					
[Electronically Filed] Date 10 19 2016	٧	with, or at the request or suggestion of, any candidate or authorized comm								
		[Electronically F	'iled]	Date	M 10	) / J				
		Signature								

PAGE 4

NAME OF COMMITTEE (In Full)  OREGON RIGHT TO LIFE VICTORY PAC    C		neddic E)			FOR SE OF	FORM 24/48			
Check if				FEC II	DENTIFICATI	ON NUMBER ▼			
Full Name of Payee Hill, Carsey, Mailing Address 1642 SW 58th Ave  State Zip Code Purpose of Expenditure design for voter guide  Willis, Colm.,  Date of Public Distribution/Dissemination  Transaction ID: WFT20154101559-1 Date of Disbursement or Obligation  Transaction ID: WFT20154101559-1 Date of Public Distribution/Dissemination  Transaction ID: WFT20154101559-1 Date of Disbursement or Obligation  Transaction ID: WFT20154101559-1 Date of Disbursement or Obligation  Transaction ID: WFT20154101559-1 Date of Disbursement or Obligation  Transaction ID: WFT20154101559-1 Date of Public Distribution/Dissemination  Transaction ID: WFT20154101559-1 Date of Disbursement or Obligation  Transaction ID: WFT20154101559-1 Date of Public Distribution/Dissemination  Transaction ID: WFT201541019159-1 Date of Public Distribution/Dissemination  Transaction ID: WFT20154101919-1 Date of Public Distribution/Dissemination  Transaction ID: WFT2015410191-1 Date of Disbursement For: X Primary Quality Date of	J	REGUN RIGHT TO LIFE VICTORY PAC		С	C00592303				
Hill, Casey, , ,   Mailing Address 1642 SW 58th Ave  City State Zip Code OR 97221  Purpose of Expenditure design for voter guide  Name of Federal Candidate  Willis, Colm , David Kilada was reimbursed for Facebook ads  Mailing Address 29560 SW Volley #50  Name of Federal Candidate  Wilson/ille OR 97070  Disbursement for City State City Code Other (specify) ▶  Date of Public Distribution/Dissemination  Wilson/ille OR 97070  Name of Federal Candidate  Wilson/ille OR 97070  Calendar Yea-To-Date Per Election for Office Sought   Amount  Calegory/ Type  Disbursement or Objigation  Tensaction ID: WF720164101916-1  Date of Public Distribution/Dissemination  Tensaction ID: WF720164101916-1  Date of Disbursement or Objigation  Tensaction ID: WF720164101916-1  Date of Dubic Distribution/Dissemination  T	Che	eck if X 24-hour report 48-hour report New report X Amends report filed							
Mailing Address 1642 SW 58th Ave  City State Zip Code OR 97221  Purpose of Expenditure design for voter guide  City State Zip Code Or Transaction ID : WFT20164101858-1 Date of Disbursement or Obligation OR 97221  Name of Federal Candidate	1		Date of	of Publi	ic Distribution	/Dissemination			
City State Zip Code 12.97 Portland OR 97221  Purpose of Expenditure design for voter guide  Name of Federal Candidate  Willis, Colm  Calendar Year-To-Date Per Election for Office Sought 12.97  Full Name of Payee Kilada, David, , , X David Kilada was reimbursed for Facebook ads  Mailing Address 29560 SW Volley #50  City State Zip Code Wilsonville OR 97070  Purpose of Expenditure social media  Name of Federal Candidate  Wilsonville  OR 97070  Transaction ID: WFT20164101958-1 Date of Dublo Usbribution/Dissemination  Amount  Transaction ID: WFT20164101916-1 Date of Dublo Usbribution/Dissemination  Transaction ID: WFT20164101916-1 Date of Dublo Usbribution/Dissemination  Transaction ID: WFT20164101916-1 Date of Dublo Usbribution ID: WFT20164101916-1 Date of Dublo Usbribution ID: WFT20164101916-1 Date of Disbursement or Obligation  Transaction ID: WFT20164101916-1 Date of Disbursement For: X Primary General  Transaction ID: WFT20164101916-1 Date of Disbursement For: X Primary General  Transaction I		·	М						
Portland  OR  97221  Furpose of Expenditure design for voter guide  Name of Federal Candidate  Willis, Colm,  Calendar Year-To-Date Purpose of Expenditure Description for Office Sought  Full Name of Payee Kilada, David, X Support Disbursement For: X Primary General Disburse		Mailing Address 1642 SW 58th Ave	Amour	nt					
Portland  OR  97221  Fransaction ID: WFT20164101858-1 Date of Disbursement or Obligation  Name of Federal Candidate  Willis, Colm.,  Calegory/ Type  Name of Pederal Candidate  Willis, Colm.,  Calendar Year-To-Date Per Election for Office Sought  OR  State  President  Senate State OR  Disbursement For: X Primary General  Date of Public Distribution/Dissemination  Transaction ID: WFT20164101858-1 Date of Disbursement or Obligation  Other (specify)   Transaction ID: WFT20164101958-1 Date of Public Distribution/Dissemination  Other (specify)   Transaction ID: WFT20164101916-1 Date of Public Distribution/Dissemination  Other (specify)   Amount  City State Zip Code Wilsonville  OR  97070  Transaction ID: WFT20164101916-1 Date of Disbursement or Obligation  Office Sought: X House District:  OS  President Senate State: OR  President Senate State: OR  Disbursement For: X Primary General  Disbursement For: X Primary General  Other (specify)   (e) TOTAL Independent Expenditures  Disbursement For: X Primary General  Other (specify)   Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Archerry, Gayke  [Electronically Filed] Date  Transaction ID: WFT20164101918-1 Date of Disbursement or Obligation  Transaction ID: WFT20164101916-1 Date of Disbursement or Obligation  Transaction ID: WFT20164101916-1 Date of Disbursement For: X Primary General  Other (specify)  Transaction ID: WFT20164101916-1 Date of Disbursement For: X Primary General  Other (specify)  Transaction ID: WFT20164101916-1 Date of Disbursement For: X Primary Genera	ŀ	City State Zip Code	Г.			12.97			
Purpose of Expenditure design for voter guide  Name of Federal Candidate  Willis, Colm. , Oppose  Calendar Year-To-Date Per Election for Office Sought  Name of Pagee  Kilada, David, , X David Kilada was reimbursed for Facebook ads  Malling Address 29560 SW Volley #50  Category'  Willis, Colm. , David Kilada was reimbursed for Facebook ads  Malling Address 29560 SW Volley #50  Category'  Willis, Colm. , Oppose  Category'  Willis, Colm. , David Kilada was reimbursed for Facebook ads  Malling Address 29560 SW Volley #50  Category'  Willis, Colm. , Oppose  Category'  Willis, Colm. , Oppose  Category'  Transaction ID : WFT20164101916-1  Date of Disbursement or Obligation  Transaction ID : WFT20164101916-1  Date of Disbursement or Obligation  Transaction ID : WFT20164101916-1  Date of Disbursement or Obligation  Transaction ID : WFT20164101916-1  Date of Disbursement For: X Primary Ceneral  Per Election for Office Sought  Amount  Category'  Transaction ID : WFT20164101916-1  Date of Disbursement For: X Primary Ceneral  Disbursement For: X Primary Ceneral  Other (specify) >  12.97  (b) SUBTOTAL of Unitemized Independent Expenditures  Purpose of Expenditures  President Senate State: OR  Disbursement For: X Primary Ceneral  Disbursement For: X Primary Ceneral  Other (specify) >  12.97  Disbursement For: X Primary Ceneral  Disbursement For: X Primary Ceneral  Other (specify) >  12.97  (c) TOTAL Independent Expenditures  Purpose of Expenditures  President Senate State: OR  Disbursement For: X Primary Ceneral									
Willis, Colm, ,		design for voter guide		- M	/ D D /	Y Y Y Y			
Calendar Year-To-Date Per Election for Office Sought  Full Name of Payee Kilada, David, , ,	ľ	Name of Federal Candidate Support Office	e Sough	t:	<b>X</b> House	District: 05			
Per Election for Office Sought  Full Name of Payee Kilada, David, , ,		Willis, Colm, , ,	Preside	ent	Senate	State: OR			
Full Name of Payee Kilada, David, , , X DAvid Kilada was reimbursed for Facebook ads Mailing Address 29560 SW Volley #50  City State Zip Code Wilsonville OR 97070 Transaction ID: WFT20164101916-1 Date of Disbursement or Obligation  Purpose of Expenditure social media  Name of Federal Candidate Willis, Colm, , Oppose  Calendar Year-To-Date Per Election for Office Sought  Amount  Category/ Type  Office Sought: X House District: O5 President Senate State: OR  Disbursement For: X Primary General  Ofther (specify) >  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures  Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  [Electronically Filed] Date  Other (specify) >  Date of Public Distribution/Dissemination  Date of Public Distribution/Dissemination  Date of Public Distribution/Dissemination  Date of Public Distribution/Dissemination  Amount  Date of Public Distribution/Dissemination  Date of Public Date of Date	Ī	Calcillati Total To Bate		t For:	<b>x</b> Primary	/ General			
Kilada, David, , ,		Per Election for Office Sought 12.97 2016		ther (s	pecify) ►				
Mailing Address 29560 SW Volley #50  City State Zip Code 77070  Wilsonville OR 97070  Purpose of Expenditure 805al media 2016  Name of Federal Candidate 7109  Willis, Colm., Oppose President Senate State: OR 2016  Calendar Year-To-Date Per Election for Office Sought 28770.30  Calendar Year-To-Date Per Election for Office Sought 38770.30  Calen		Kilada, David, , ,	M M / D D / Y Y Y Y						
City State Zip Code 20.00  Wilsonville OR 97070  Purpose of Expenditure social media  Category/ Type  Name of Federal Candidate Willis, Colm, , Oppose  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures  (b) SUBTOTAL of Unitemized Independent Expenditures  Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Atteberry, Gayle, , IElectronically Filed  Date  Atteberry, Gayle, , IElectronically Filed  Date  Amount  Amount  Amount  Anount  Transaction ID: WF120164101916-1  Date Oblisbursement or Obligation  President Senate State: OR  President Senate State: OR  Other (specify)   Other (specify)   12.97  (b) SUBTOTAL of Unitemized Independent Expenditures  (c) TOTAL Independent Expenditures  (d) Total Independent Expenditures  (e) TOTAL Independent Expenditures  (f) Total Independent Expenditures  (g) Total Independent Expenditures  (h) Total Independent Expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		Mailing Address	_ 04 28 2016						
Wilsonville  OR  97070  Transaction ID: WFT20164101916-1 Date of Disbursement or Obligation  Purpose of Expenditure social media  Name of Federal Candidate  Willis, Colm, , Oppose  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures  (b) SUBTOTAL of Unitemized Independent Expenditures  Under penalty of perjury   certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.    Itelectronically Filed    Date   10   19   2016   10   10   10   10   10   10   10		29300 3W Volley #30	Amou	nt					
Purpose of Expenditure social media  Name of Federal Candidate  Willis, Colm, ,		City State Zip Code	L			20.00			
Name of Federal Candidate  Willis, Colm, , ,									
Willis, Colm, , , Oppose President Senate State: OR  Calendar Year-To-Date Per Election for Office Sought 28770.30  (a) SUBTOTAL of Itemized Independent Expenditures		social media Category/	М						
Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures		Name of Federal Candidate Support Office	e Sough	t:	<b>x</b> House	District: 05			
Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures		Willis, Colm, , , Oppose	Preside	ent [	Senate	State: OR			
(a) SUBTOTAL of Itemized Independent Expenditures		2016	i			y General			
(b) SUBTOTAL of Unitemized Independent Expenditures	_			tner (s	pecity)				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  **Atteberry, Gayle, , , ** [Electronically Filed]** Date **10** In the properties of the proper	(	(a) SUBTOTAL of Itemized Independent Expenditures				12.97			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  **Atteberry, Gayle, , ,  [Electronically Filed] Date 10 19 2016	(	(b) SUBTOTAL of Unitemized Independent Expenditures							
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Atteberry, Gayle, , ,   [Electronically Filed] Date 10 19 2016	(	(c) TOTAL Independent Expenditures		- 7					
[Electronically Filed] Date 10 19 2016	١	with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political							
24.0		[F1 + 1] - F2 - 1]							
		Buto			-				

PAGE 5

PAGE 6 OF 9 FOR SE OF FORM 24/48									
NAME OF COMMITTEE (In Full)				FEC ID	DENTIFICATION NUMBER ▼				
OREGON RIGHT TO LIFE VICTORY	C00592303								
				M = M /	D = D / Y = Y = Y				
Check if 24-hour report 48-hour report	New repo	ort X Amends repo	ort filed on	05	10 2016				
Full Name of Payee Eagle Mailing Service			Dat	e of Public	Distribution/Dissemination				
Mailing Address 4907 Indian School Road NE				04	20 2016				
			Am	ount					
City	State	Zip Code	L		2.14				
Salem	OR	97305		Transaction ID: WFT2016410198-1 Date of Disbursement or Obligation					
Purpose of Expenditure mailing of voter guide		Category/ Type		05	02 / 2016				
Name of Federal Candidate		<b>✗</b> Support	Office Sou	ıght:	House District: 05				
Willis, Colm, , ,		Oppose		sident	Senate State: OR				
Calendar Year-To-Date Per Election for Office Sought	7	18.90	Disbursem 2016	ent For: Other (sp	▼ Primary General ecify) ▶				
Full Name of Payee			Da	te of Public	Distribution/Dissemination				
Eagle Web Press				M M /	D D / Y Y Y Y Y				
Mailing Address 4901 Indian School Rd NE		04 20 2016							
Mailing Address 4901 Indian School Rd NE			Am	ount					
City	State	Zip Code			5.12				
Salem	OR	97305	<b>Trar</b> Da	Transaction ID : WFT20164101911-1 Date of Disbursement or Obligation					
Purpose of Expenditure voter guide printing		Category/ Type		05 M	02 / 2016				
Name of Federal Candidate		<b>x</b> Support	Office Sou	ıght:	K House District: 05				
Willis, Colm, , ,		Oppose	Pres	sident	Senate State: OR				
Calendar Year-To-Date Per Election for Office Sought		24.02	Disbursen 2016		Y Primary General				
				Other (sp	pecify)				
(a) SUBTOTAL of Itemized Independent Expenditures									
(b) SUBTOTAL of Unitemized Independent Expendent	(b) SUBTOTAL of Unitemized Independent Expenditures								
(c) TOTAL Independent Expenditures			•		1 4 1 4				
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	late or authorized								
Atteberry, Gayle, , ,	[Electron	nically Filed] Date	e 10	/ 19	2016				
Signature		_							

FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ OREGON RIGHT TO LIFE VICTORY PAC C00592303 Check if | X | 24-hour report New report | X | Amends report filed on 48-hour report 05 2016 10 Full Name of Payee Date of Public Distribution/Dissemination Gateway Communications, Inc. 2016 04 25 Mailing Address 16805 NE Mason Court Amount State Zip Code City 7732.28 Transaction ID : WFT20164101932-1 OR 97230 Portland Date of Disbursement or Obligation Purpose of Expenditure Category/ design, printing and mailing of postcard 04 27 2016 Type Name of Federal Candidate 05 × Support Office Sought: **X** House District: Willis, Colm,,,, OR Oppose President Senate State: Primary Disbursement For: X General Calendar Year-To-Date 26725.30 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination KPDQ/The Fish 2016 Mailing Address 6400 Se Lake Road, Suite 350 Amount City State Zip Code 8969.00 OR Transaction ID: WFT20164101912-1 Portland 97222 Date of Disbursement or Obligation Purpose of Expenditure Category/ radio ads 2016 04 18 Type Name of Federal Candidate 05 **✗** Support Office Sought: **✗** House District: Willis, Colm, , , OR Oppose President Senate State: **x** Primary Disbursement For: General Calendar Year-To-Date 2016 8993.02 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 16701.28 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Atteberry, Gayle, , , [Electronically Filed] 10 19 2016 Date Signature

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### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	ENT EXICITE	TOTILS		PAGE 8 OF 9 FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)  ODE COM DICUIT TO LIFE VICTORY DAC								
OREGON RIGHT TO LIFE VICTORY PAC  C C00592303								
Check if 24-hour report 48-hour report New report Amends report filed on 05 10 2016								
Full Name of Payee Postmaster			Date	of Public Distribution/Dissemination				
Mailing Address 1050 25th St Se				04 20 2016				
			Amo	ount				
City	State	Zip Code		3.79				
Salem	OR	97301		saction ID : WFT2016410195-1 of Disbursement or Obligation				
Purpose of Expenditure mailing of voter guide		Category/ Type		M 04 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Federal Candidate		<b>x</b> Support	Office Soug	ght: 🗶 House District: 05				
Willis, Colm, , ,		Oppose	Presi	dent Senate State: OR				
Calendar Year-To-Date Per Election for Office Sought		16.76	Disburseme 2016	ent For: <b>X</b> Primary General  Other (specify) ▶				
Full Name of Payee			Date	e of Public Distribution/Dissemination				
KYKN Salem Media				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address PO Box 1430			Amo	punt				
City	State	Zip Code		2025.00				
Salem	OR	97308		saction ID : WFT20164101934-1 e of Disbursement or Obligation				
Purpose of Expenditure radio ads		Category/ Type		04 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Federal Candidate		<b>x</b> Support	Office Sou	ght: <b>x</b> House District: 05				
Willis, Colm, , ,		Oppose	Presi	dent Senate State: OR				
Calendar Year-To-Date Per Election for Office Sought		28750.30	Disburseme 2016	ent For:   ✓ Primary   General  Other (specify)				
(a) SUBTOTAL of Itemized Independent Expend	itures			2028.79				
				7 7 7				
(b) SUBTOTAL of Unitemized Independent Expe	nditures		·· •	7				
(c) TOTAL Independent Expenditures			• [					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.								
Atteberry, Gayle, , , Signature	[Electro	nically Filed] Date	10	19 2016				
5.g.iataro								

FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ OREGON RIGHT TO LIFE VICTORY PAC C00592303 Check if | X | 24-hour report New report | X | Amends report filed on 48-hour report 05 2016 10 Full Name of Payee Date of Public Distribution/Dissemination Gateway Communications, Inc. this invoice is unpaid 2016 05 09 Mailing Address 16805 NE Mason Court Amount State Zip Code City 3000.00 Transaction ID : WFT20164101920-1 OR 97230 Portland Date of Disbursement or Obligation Purpose of Expenditure Category/ telephone polling 05 16 2016 Type Name of Federal Candidate 05 Office Sought: **✗** Support **X** House District: Willis, Colm,,,, OR Oppose President Senate State: **X** Primary Disbursement For: General Calendar Year-To-Date 31770.30 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Mailing Address Amount City State Zip Code Date of Disbursement or Obligation Purpose of Expenditure Category/ Type Name of Federal Candidate Support Office Sought: House District: Oppose President Senate State: Disbursement For: Primary General Calendar Year-To-Date Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 0.00 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... 52619.06 Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Atteberry, Gayle, , , [Electronically Filed] 10 19 2016 Date Signature

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